



Application Rec'd: _____
Processed By: _____
Amount Received: _____
Operator Number: _____
Tramway Number: _____

**Department of Labor & Industry
National Life Bldg., Drawer 20
Montpelier, VT 05620-3401**

Renewal Application for Tramway Registration

Name of Area: _____

Town or City: _____

Manager or
Responsible Official: _____

Mailing Address: _____

Telephone Number: _____

Vermont State Length of
Tramway Number: _____ Lift: _____

Tramway Name and
Type: _____

Did this tramway operate during the past season: Yes ☐ No ☐ Winter ☐ Summer ☐

Did any personal injury incidents occur on this tramway during the previous registration year?
Yes ☐ No ☐ Were incident reports filed? Yes ☐ No ☐

Did any mechanical/electrical incidents occur on this tramway during the previous registration year?
Yes ☐ No ☐ Were incident reports filed? Yes ☐ No ☐

Have all Orders or Recommendations of the State Inspector regarding this lift been complied with to date:
Yes ☐ No ☐ If no, please explain:

Any changes in length? Yes ☐ No ☐ **If yes, please file a modified application with this office.**

Have any other changes been made in the tramway since the end of the previous season?

Yes ☐ No ☐

If yes, please file a modified application with this office.

I certify that to the best of my knowledge and belief the answers to the above questions are correct, that safety precautions are being taken, and qualified personnel are employed.

Manager or Responsible Official

Title

All registrations expire on October 31 of each year, and the registration fee must accompany this application. Checks should be made payable to the State of Vermont. As to registration and fees for tramways, referral should be made to 31 V.S.A. § 707.